

# SKATE SHARPENING

NAME \_\_\_\_\_

DATE \_\_\_\_\_

PHONE \_\_\_\_\_

NEED BY \_\_\_\_\_

Type of Grind – Please check one:

FS (.50) \_\_\_\_\_ .625 \_\_\_\_\_ Cost: \$9.00 Combination  
(.75) \_\_\_\_\_ Cost: \$7.00

Make checks payable to:

*“Blades to Ballet”* Check # \_\_\_\_\_

Sharpener – Leave this form & check in the RFSC office.

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## TO BE FILLED OUT BY SHARPENER:

Name of Skater:

\_\_\_\_\_  
Skates Sharpened by:

\_\_\_\_\_  
Type of Grind: \_\_\_\_\_

Date: \_\_\_\_\_

This slip is provided so you know who sharpened your skates and the type of grind you received. Our goal is to provide you, with the “BEST” quality sharpening available. We are here to service your needs and if there is a problem with your skates we will correct the problem. Please let us know the nature of the problem and bring skates back with this form. If you have any questions, please call *Blades to Ballet* at 507-281-1401.

THANK YOU FOR YOUR BUSINESS!!!